PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE F. Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571)273-2885, on the date indicated below.

ATTORNEY DOCKET NO.

ENDOS 64190

(Signature (Date

CONFIRMATION NO.

6647

INSTRUCTIONS: This form should be used for meaniting the ISSUE FEE and PIBLICATION FEE (if required) Blocks I through 5 should be completed where superpoints A.I intribute companyates and extraction of maintenance free will be mailed to the current conditionable and indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

> FIRST NAMED INVENTOR Patrick P. Wu

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🎏 Corporation or other private group entity 🛄 Government	
4a. The following fee(s) are submitted: Size Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by redict card. Form PTO-2038 is attached. Payment by rediction, or credit any brepayment, to Depost Account Number 0.6 —2.42.5 (enclose an extra copy of this form).
Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted.	b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2). pted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in ark Office.
Authorized Signature /Thomas H. Majcher/ Typed or printed name Thomas H. Majcher	Date Day 11 1 6 - 3 - 10 Registration No. 31,119
This collection of information is required by 37 CFR. 1311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially its governed by 51 USC. 122 and 37 CFR. 14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief Information Officer, U.S. Petartism to T. Commerce, P.O. Box 1450, Alexandria, Virginai 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Commissioner for Patents, P.O. Box 1450, Alexandria, Virginai 22313-1450.	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SANTA CLARA, CA

24201

APPLICATION NO.

10/661 406

(A) NAME OF ASSIGNEE

7590

FULWIDER PATTON LLP HOWARD HUGHES CENTER 6060 CENTER DRIVE, TENTH FLOOR LOS ANGELES, CA 90045

03/25/2010

FILING DATE

09/12/2003 TITLE OF INVENTION: DELIVERY SYSTEM FOR MEDICAL DEVICES

ABBOTT VASCULAR SOLUTIONS INC.